

# APPLICATION FOR EMPLOYMENT



## PERSONAL INFORMATION

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State, ZIP

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

Social Security Number: \_\_\_\_\_

Are you a US Citizen? YES / NO

Do you have a valid WA State drivers license? YES / NO

Have you ever been convicted of a felony? YES / NO If yes, Please explain. \_\_\_\_\_

## EDUCATION

| School Name | Location | Years Attended | Degree Received | Major |
|-------------|----------|----------------|-----------------|-------|
|             |          |                |                 |       |
|             |          |                |                 |       |
|             |          |                |                 |       |

Other training, certifications or licenses held: \_\_\_\_\_

## EMPLOYMENT HISTORY

Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Pay Rate: \$ \_\_\_\_\_

Address: \_\_\_\_\_

Position; \_\_\_\_\_ Supervisors Name: \_\_\_\_\_

Duties Performed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact them: YES / NO

## PROFESSIONAL REFERENCES

| Name | Title | Company | Phone |
|------|-------|---------|-------|
|      |       |         |       |
|      |       |         |       |
|      |       |         |       |

## Acknowledgement and Authorization

I certify that all answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interviews may result in discharge.